

COUNTY OF SAN BERNARDINO STANDARD PRACTICE

DEPARTMENT

MENTAL HEALTH

SUBJECT

BENZODIAZEPINE MEDICATION POLICY

PROVED

13-1.11

my N. Belen, M.D.

Director

ISSUE

OF 1

PAGE 1

EFFECTIVE Rev. 7/94

I. PURPOSE

To insure that all medications in the benzodiazepine category be prescribed within accepted guidelines. This, in turn, will reflect a high quality of care and produce the absolute minimum of serious side effects such as abuse, dependency, etc.

POLICY II.

All prescriptions for benzodiazepine medications will be limited to a maximum period of eight (8) weeks duration. The diagnosis should be appropriate to justify benzodiazepine use. Exception: Long acting benzodiazepine (Klonopin) can be used for certain diagnostic categories and for longer than eight weeks subject to approval by the Medications Monitoring Committee and availability by Medi-Cal (Medi-Cal limit 3 months).

III. PROCEDURES

- Whenever the attending psychiatrist prescribes any Α. benzodiazepine medication he/she will notify the client that there is an absolute maximum of eight (8) weeks limitation on the use of the drug.
- Only clients in active on-going therapy are В. eligible for benzodiazepine medications.
- In the treatment of panic disorder, C. benzodiazepines are not to be used until all other approaches have been tried (Imiprimine, Nardil, etc.)
- D. When benzodiazepines are prescribed every effort should be made to avoid the short acting drugs such as Xanax or Ativan. Preference should be given to long acting benzodiazepines such as Clonazepam (Klonopin).
- Even with use of long-acting Benzodiazepine i.e. E. Klonopin - justification for ongoing use is a must.

NCB/jp a:2-4.45